Fill	in this informa	ation to identify your cas	se:				
Deb	otor 1	Raymond Paul Link					
Dob	ator O	First Name	Middle Name	Last Name			
1		First Name	Middle Name	Last Name			
Unit	ted States Bank	kruptcy Court for the:	EASTERN DISTRICT (DF WISCONSIN			
Cas	se number 16	- S-23475					
	· · · · · · · · · · · · · · · · · · ·	7-20-113				_	
Su Be a	mmary of as complete an armation. Fill ou	Your Assets and accurate as possible. It all of your schedules	If two married people first; then complete the	e are filing together, both are equally respons he information on this form. If you are filing a	ible fo	r supplyin	g correct
Debtor 2 (Spouse fi, filling) First Name							
1.						\$	0.00
	1b. Copy line	62, Total personal proper	ty, from Schedule A/B.			\$	5,003.73
	1c. Copy line	63, Total of all property o	n Schedule A/B			\$	5,003.73
Par	t 2: Summar	rize Your Liabilities					
2.					e D	\$	0.00
3.						\$	3,475.99
	3b. Copy the	total claims from Part 2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F		\$	87,731.59
				Your total liab	ilities	\$	91,207.58
Par	t 3: Summa	rize Your Income and Ex	rpenses				
4.		our Income (Official Form		e /	·····	\$	3,116.00
5.	Schedule J: Y	our Expenses (Official Fo	orm 106J)			¢	3.715.00

Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,846.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,475.99
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,475.99

Debtor 1	Raymond Paul Link			
Jebioi i		Middle Name Last Name		
Debtor 2	Rhonda Sue Link			
Spouse, if filing)	First Name	Middle Name Last Name		
Jnited States Ba	ankruptcy Court for the: EASTI	ERN DISTRICT OF WISCONSIN		
Case number	16-23475			☐ Check if this is an amended filing
Official Fo	orm 106A/B			
	le A/B: Property			12/15
		List an asset only once. If an asset fits in more than o	ne category list the asset in	
nink it fits best. If formation. If monswer every que	Be as complete and accurate as pore space is needed, attach a separation.	essible. If two married people are filing together, both a ate sheet to this form. On the top of any additional pag	re equally responsible for su	pplying correct
Part 1: Describe	Each Residence, Building, Land,	or Other Real Estate You Own or Have an Interest In		
Do you own or	have any legal or equitable interes	st in any residence, building, land, or similar property?		
■ No. Go to Pa	rt 2			
Yes. Where				
	io and property.			
Part 2: Describe	Your Vehicles			
omeone else dri		interest in any vehicles, whether they are register report it on Schedule G: Executory Contracts and U hicles, motorcycles		ehicles you own that
omeone else dri	ives. If you lease a vehicle, also	report it on Schedule G: Executory Contracts and L		ehicles you own that
omeone else dri . Cars, vans, tr	ives. If you lease a vehicle, also	report it on Schedule G: Executory Contracts and L	Inexpired Leases. Do not deduct secured cl	aims or exemptions. Put
Cars, vans, to No Yes 3.1 Make:	ives. If you lease a vehicle, also rucks, tractors, sport utility vel	report it on Schedule G: Executory Contracts and U hicles, motorcycles Who has an interest in the property? Check one Debtor 1 only	Inexpired Leases.	aims or exemptions. Put ed claims on Schedule D:
Cars, vans, to No Yes 3.1 Make: Model: Year:	Jeep Grand Cherokee	who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the
Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima	Jeep Grand Cherokee 2002 te mileage: 182,243	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	aims or exemptions. Put ad claims on <i>Schedule D:</i> ms Secured by Property.
Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor	Jeep Grand Cherokee 2002 te mileage: 182,243	who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the
Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor	Jeep Grand Cherokee 2002 tte mileage: mation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the
Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor	Jeep Grand Cherokee 2002 te mileage: 182,243 mation: //alue is based on NADA	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$0.00
Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor Market v	Jeep Grand Cherokee 2002 tte mileage: 182,243 mation: value is based on NADA	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Do not deduct secured cl the amount of any secure	aims or exemptions. Put ad claims on Schedule D: ans Secured by Property. Current value of the portion you own? \$0.00 aims or exemptions. Put ad claims on Schedule D:
Cars, vans, to Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor Market v 3.2 Make: Model:	Jeep Grand Cherokee 2002 tte mileage: 182,243 mation: value is based on NADA Ford Escort	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put be claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$0.00 aims or exemptions. Put be claims on Schedule D: ms Secured by Property.
Cars, vans, to Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor Market v 3.2 Make: Model: Year:	Jeep Grand Cherokee 2002 tte mileage: 182,243 mation: value is based on NADA	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Do not deduct secured cl the amount of any secure	aims or exemptions. Put ad claims on Schedule D: ans Secured by Property. Current value of the portion you own? \$0.00 aims or exemptions. Put ad claims on Schedule D:
Cars, vans, to Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor Market v 3.2 Make: Model: Year:	Jeep Grand Cherokee 2002 te mileage: 182,243 mation: //alue is based on NADA Ford Escort 1993 te mileage: 279,988	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put ad claims on Schedule D: Ims Secured by Property. Current value of the portion you own? \$0.00 aims or exemptions. Put ad claims on Schedule D: Ims Secured by Property. Current value of the
Cars, vans, to Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor Market v 3.2 Make: Model: Year: Approxima Other infor Other infor Other infor	Jeep Grand Cherokee 2002 te mileage: 182,243 mation: //alue is based on NADA Ford Escort 1993 te mileage: 279,988	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put be claims on Schedule Doms Secured by Property. Current value of the portion you own? \$0.00 aims or exemptions. Put be claims on Schedule Doms Secured by Property. Current value of the portion you own?
Cars, vans, to Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor Market v 3.2 Make: Model: Year: Approxima Other infor Other infor Market v	Jeep Grand Cherokee 2002 the mileage: 182,243 mation: //alue is based on NADA Ford Escort 1993 the mileage: 279,988 mation: //alue is based on NADA	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00	aims or exemptions. Put ad claims on Schedule D: Ims Secured by Property. Current value of the portion you own? \$0.00 aims or exemptions. Put ad claims on Schedule D: Ims Secured by Property. Current value of the
Cars, vans, to Cars, vans, to No Yes 3.1 Make: Model: Year: Approxima Other infor Market v 3.2 Make: Model: Year: Approxima Other infor Market v	Jeep Grand Cherokee 2002 Ite mileage: 182,243 mation: value is based on NADA Ford Escort 1993 Ite mileage: 279,988 mation: value is based on NADA	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Check if this is community property (see instructions) Check if this is community property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$0.00 \$0.00	aims or exemptions. Put be claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$0.00 aims or exemptions. Put be claims on Schedule D: ms Secured by Property. Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 1

Page 3 of 57

Debtor 1 Debtor 2	Raymond Pa Rhonda Sue		wn) 16-23475
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=>	\$0.00
		onal and Household Items egal or equitable interest in any of the following items?	Current value of the
	,		portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> □ No	ehold goods and f ples: Major appliar s. Describe	furnishings nces, furniture, linens, china, kitchenware	
		Household goods and furnishings	\$755.00
□ No	ples: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; must phones, cameras, media players, games	sic collections; electronic devices
		Electronics	\$315.00
Exam		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, ons, memorabilia, collectibles	coin, or baseball card collections;
		Books, movies, DVDs, and collectibles	\$100.00
Exam ■ No	ment for sports and ples: Sports, photo musical instructions. Describe	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can	pes and kayaks; carpentry tools;
■ No		s, shotguns, ammunition, and related equipment	
□ No		othes, furs, leather coats, designer wear, shoes, accessories	
		Clothing	\$200.00
□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gen	ns, gold, silver
 res	5. DESCRIBE	Jewelry	\$100.00
		· -	

Official Form 106A/B Schedule A/B: Property page 2

	ebtor 1 ebtor 2	Raymond Pau Rhonda Sue L					Case number (if known)	16-23475
		arm animals oles: Dogs, cats, bir	ds, ho	rses				
		Describe						
			1 Ferr	et, 1 turtle, an	nd 5 sma	all fish		\$0.00
	No	ther personal and			did not a	already list, including any hea	alth aids you did not list	
15						, including any entries for pa	ges you have attached	\$1,470.00
Pa	rt 4: De:	scribe Your Financia	ıl Asset	s				
Do	you ow	vn or have any leg	al or e	quitable interes	st in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	oles: Money you ha		•		in a safe deposit box, and on h	and when you file your petiti	on
	Examp □ No					; certificates of deposit; shares the same institution, list each. Institution name:	in credit unions, brokerage l	nouses, and other similar
	100			Checking ar	nd			
			17.1.	savings		US Bank		\$0.00
		s, mutual funds, or oles: Bond funds, in				ige firms, money market accou	nts	
				Institution or iss	uer name	e:		
	joint v ■ No	ublicly traded stoc venture Give specific inform	mation			ed and unincorporated busing	esses, including an interes % of ownership:	t in an LLC, partnership, and
20.	Negoti	<i>iable instruments</i> in	ate boi clude p	nds and other noters on all checks,	, cashiers	le and non-negotiable instrur s' checks, promissory notes, an r to someone by signing or deli	nents d money orders.	
	☐ Yes.	Give specific inform		about them uer name:				
	Examp ■ No		A, ERIS	SA, Keogh, 401(k), 403(b), thrift savings accounts, or oth	ner pension or profit-sharing	plans
	⊔ Yes.	List each account s		ely. of account:		Institution name:		

Official Form 106A/B Schedule A/B: Property page 3

		Raymond Paul Link Rhonda Sue Link			Case number (if known)	16-23475
	Your sh Examp	hare of all unused deposits you h				es, or others
			Insti	ution name or individual:		
		Rental depo	osit <u>Sec</u>	urity deposit		\$1,700.00
		ies (A contract for a periodic payr	ment of money to you, ei	ther for life or for a number of	years)	
	☐ Yes	lssuer name and c	escription.			
	26 U.S.C			LE program, or under a qua	lified state tuition prog	gram.
		Institution name ar	nd description. Separate	y file the records of any intere	sts.11 U.S.C. § 521(c):	
		equitable or future interests in	property (other than a	nything listed in line 1), and	rights or powers exer	cisable for your benefit
Security deposits and prosportions and prosportion Security deposit Security Securit						
	Ехатр		•		ts	
	☐ Yes.	Give specific information about t	nem			
	Examp			ociation holdings, liquor licens	es, professional license	es
		Give specific information about t	nem			
		•				Current value of the
,	, ,	,				<pre>portion you own? Do not deduct secured</pre>
	_	unds owed to you				
	☐ Yes. (Give specific information about th	em, including whether y	ou already filed the returns an	d the tax years	
	_Examp	• •	ny, spousal support, chile	d support, maintenance, divord	ce settlement, property	settlement
	Yes. 0	Give specific information				
			Monthly child supp	port payments	Child support	\$541.00
30.		oles: Unpaid wages, disability insu		ity benefits, sick pay, vacation	pay, workers' compen	sation, Social Security
		Give specific information				
31.	Interest Examp	ts in insurance policies	ance; health savings ac	count (HSA); credit, homeown	er's, or renter's insuran	ce
		Name the insurance company of Company i		alue. Beneficiar	y:	Surrender or refund

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Official Form 106A/B

Best Case Bankruptcy

page 4

Schedule A/B: Property

value:

	Term life insurance policy with Lincoln Financial - no cash value Mr. Link is the beneficiary				
	is due you from someone who has died living trust, expect proceeds from a life insurance pon	policy, or are currently entitled to rec	eive property because		
	whether or not you have filed a lawsuit or mad ment disputes, insurance claims, or rights to sue	le a demand for payment			
34. Other contingent and unliqu ■ No □ Yes. Describe each claim	idated claims of every nature, including counte	erclaims of the debtor and rights t	o set off claims		
35. Any financial assets you did ☐ No ■ Yes. Give specific information					
	Preference payment with Unifund 2015CV001134 in the last 90 days 1/21/2016 to present.		\$1,292.73		
	of your entries from Part 4, including any entrie		\$3,533.73		
Part 5: Describe Any Business-Rel	ated Property You Own or Have an Interest In. List an	y real estate in Part 1.			
37. Do you own or have any legal or■ No. Go to Part 6.□ Yes. Go to line 38.	equitable interest in any business-related property?				
Part 6: Describe Any Farm- and Co If you own or have an interest	mmercial Fishing-Related Property You Own or Have in farmland, list it in Part 1.	an Interest In.			
46. Do you own or have any lega ■ No. Go to Part 7. □ Yes. Go to line 47.	al or equitable interest in any farm- or commerc	cial fishing-related property?			
Part 7: Describe All Property	You Own or Have an Interest in That You Did Not List	Above			
53. Do you have other property Examples: Season tickets, co ■ No □ Yes. Give specific information					
54. Add the dollar value of all of	of your entries from Part 7. Write that number h	ere	\$0.00		

Official Form 106A/B

Schedule A/B: Property

Case number (if known) 16-23475

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00		
57.	Part 3: Total personal and household items, line 15		\$1,470.00		
58.	Part 4: Total financial assets, line 36		\$3,533.73		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$5,003.73	Copy personal property total	\$5,003.73
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$5,003.73

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Raymond Paul Li	nk		
	First Name	Middle Name	Last Name	
Debtor 2	Rhonda Sue Link			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PF WISCONSIN	
Case number	16-23475			
(if known)	10 20 110			if this is an led filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

☐ You are claiming state and federal nonband ☐ You are claiming federal exemptions. 11 to 2. For any property you list on Schedule A/B Brief description of the property and line on Schedule A/B that lists this property Household goods and furnishings Line from Schedule A/B: 6.1 Electronics Line from Schedule A/B: 7.1	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	You are claiming federal exemptions. 11 For any property you list on Schedule A/B Brief description of the property and line on Schedule A/B that lists this property Household goods and furnishings Line from Schedule A/B: 6.1 Electronics	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	-	\$755.00		\$755.00	11 U.S.C. § 522(d)(3)
	Line Holli Schedule PAD. 4.1			100% of fair market value, up to any applicable statutory limit	
		\$315.00		\$315.00	11 U.S.C. § 522(d)(3)
	Line IIIIII Schedule AVB. 7.1			100% of fair market value, up to any applicable statutory limit	
	, , , , ,	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	•	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
	Line Holli Schedule PVD. 11.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry Line from Schedule A/B: 12.1	\$100.00	•	\$100.00	11 U.S.C. § 522(d)(4)
	Line from Scriedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor 1 Raymond Rhonda Su				Case number (if known)	16-23475
Brief description of t	he property and line on sts this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Rental deposit:	Security deposit	\$1,700.00		\$1,700.00	11 U.S.C. § 522(d)(5)
Line nom schedule	- AV D. 22. 1			100% of fair market value, up to any applicable statutory limit	
Child support: N	Monthly child support	\$541.00		\$541.00	11 U.S.C. § 522(d)(10)(D)
Line from Schedule	e A/B: 29.1			100% of fair market value, up to any applicable statutory limit	
Term life insura	nce policy with al - no cash value	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Mr. beneficiary Line from Schedule	Link is the			100% of fair market value, up to any applicable statutory limit	
	nent with Unifund er 2015CV001134 in	\$1,292.73		\$1,292.73	11 U.S.C. § 522(d)(5)
the last 90 days bankruptcy. to present. Line from Schedule	prior to filing 1/21/2016			100% of fair market value, up to any applicable statutory limit	
	a homestead exemption of ent on 4/01/19 and every 3			led on or after the date of adjustmer	nt.)
_ `	acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
□ No □ Yes					

Page 10 of 57

Fill in this infor	mation to identify your	case:			
Debtor 1	Raymond Paul Li	nk			
	First Name	Middle Name	Last Name		
Debtor 2	Rhonda Sue Link				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F WISCONSIN		
Case number	16-23475				
(if known)				☐ Check if this is a	an
				amended filing	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Fill	in this informa	ation to identify your c	ase:						
Deb	tor 1	Raymond Paul Lir	nk						
		First Name		Name	Last N	lame	_		
	tor 2	Rhonda Sue Link							
(Spou	use if, filing)	First Name	Middle	Name	Last N	lame			
Unit	ed States Banl	kruptcy Court for the:	EASTERN	N DISTRICT	OF WISCONSI	N			
		6-23475							
(if kno	own)							_	if this is an
								amend	led filing
∩ffi	icial Form	106E/E							
		F: Creditors W	ha Hav	o Uncoc	surad Clai	me			12/15
		accurate as possible. Use							
left. A	Attach the Conti	rs Who Have Claims Secu nuation Page to this pag- ber (if known). of Your PRIORITY Un:	e. If you have	e no informat					
		s have priority unsecured							
	No. Go to Pa	• •	i cialliis aya	ilist your					
	_	II Z.							
	Yes.								
i I	dentify what type possible, list the	priority unsecured claims of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a par	s both priority r according to	and nonprior the creditor's	rity amounts, list the name. If you have	nat claim here ar re more than two	nd show both priority a	ind nonpriority amoun	ts. As much as
((For an explanati	ion of each type of claim, s	ee the instruc	ctions for this f	form in the instruc	tion booklet.)			
						ŕ	Total claim	Priority amount	Nonpriority amount
2.1		ent of the Treasury		Last 4 digits	of account num	ber	\$2,442.81	\$2,442.81	\$0.00
	Priority Cred			M/h an waa 4h	ne debt incurred?				
		Revenue Service City, MO 64999		when was th	ie debt incurred			-	
		eet City State Zlp Code		As of the dat	te you file, the cla	aim is: Check al	I that apply		
	Who incurred	the debt? Check one.		☐ Contingen	nt				
	Debtor 1 on	ly		☐ Unliquidat	ted				
	Debtor 2 on	ly		☐ Disputed					
	Debtor 1 an	d Debtor 2 only		Type of PRIC	ORITY unsecured	claim:			
	☐ At least one	of the debtors and anothe	r	☐ Domestic	support obligation	ıs			
	Check if thi	is claim is for a commun	itv debt	■ Taxes and	d certain other deb	ots you owe the	government		
		bject to offset?	.,	☐ Claims for	r death or persona	ıl injury while you	u were intoxicated		
	■ No	•		Other. Spe	ecify				
	Yes				-				

otor 2 Rhonda Sue Link		Case no	umber (if know)	16-23475		
Wisconsin Department of Revenue	Last 4 digits of account number	5081	\$1,033.18	\$1,03	3.18	\$0.0
Priority Creditor's Name Special Procedures Unit P.O. Box 8901	When was the debt incurred?			_		
Madison, WI 53708-8901 Number Street City State Zlp Code	As of the date you file, the claim is	· Check all	that annly			
Who incurred the debt? Check one.	☐ Contingent	. Oncor an	шас арріу			
☐ Debtor 1 only	☐ Unliquidated					
Debtor 2 only	☐ Disputed					
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured clair	n·				
_	☐ Domestic support obligations					
At least one of the debtors and another	•					
Check if this claim is for a community debt	■ Taxes and certain other debts yo	_				
s the claim subject to offset?	Claims for death or personal injur	y while you	were intoxicated			
No	Other. Specify					
☐ Yes						
No. You have nothing to report in this part. Submit		hedules.				
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	this form to the court with your other so alphabetical order of the creditor will laim. For each claim listed, identify wha	no holds ea t type of cla	im it is. Do not list cl	aims already inc	luded in Part	1. If more
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	this form to the court with your other so alphabetical order of the creditor will laim. For each claim listed, identify wha	no holds ea t type of cla	im it is. Do not list cl	aims already inc	luded in Part	1. If more Page of
No. You have nothing to report in this part. Submit Yes. Ist all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2. Americollect Inc	this form to the court with your other so alphabetical order of the creditor will laim. For each claim listed, identify wha	no holds ea t type of cla an three nor	im it is. Do not list cl	aims already inc	luded in Part Continuation	1. If more Page of
No. You have nothing to report in this part. Submit Yes. It all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other rt 2. Americollect Inc Nonpriority Creditor's Name	this form to the court with your other so alphabetical order of the creditor what laim. For each claim listed, identify what creditors in Part 3.If you have more that Last 4 digits of account number	no holds ea t type of cla an three nor	im it is. Do not list cl apriority unsecured c	aims already inc	luded in Part Continuation	1. If more Page of
No. You have nothing to report in this part. Submit Yes. st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2. Americollect Inc Nonpriority Creditor's Name PO Box 1566	this form to the court with your other so alphabetical order of the creditor what it is alphabetical order of the creditor what is alphabetical order of the creditors in Part 3.If you have more that	no holds ea t type of cla an three nor	im it is. Do not list cl apriority unsecured c	aims already inc	luded in Part Continuation	1. If more Page of
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the asecured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2. Americollect Inc Nonpriority Creditor's Name PO Box 1566 Manitowoc, WI 54221 Number Street City State Zlp Code	this form to the court with your other so alphabetical order of the creditor what laim. For each claim listed, identify what creditors in Part 3.If you have more that Last 4 digits of account number	no holds ea t type of cla an three nor 0001 6/01/1	im it is. Do not list of appriority unsecured of the secured of th	aims already inc	luded in Part Continuation	1. If more Page of
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the necured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other art 2. Americollect Inc Nonpriority Creditor's Name PO Box 1566 Manitowoc, WI 54221	this form to the court with your other so alphabetical order of the creditor what in the creditor what creditors in Part 3.If you have more the last 4 digits of account number. When was the debt incurred?	no holds ea t type of cla an three nor 0001 6/01/1	im it is. Do not list of appriority unsecured of the secured of th	aims already inc	luded in Part Continuation	1. If more Page of
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No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the assecured claim, list the creditor separately for each clain one creditor holds a particular claim, list the other art 2. Americollect Inc Nonpriority Creditor's Name PO Box 1566 Manitowoc, WI 54221 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other so alphabetical order of the creditor what in the count is alphabetical order of the creditor what is a creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 4.If you have more that 4.If yo	no holds eat type of claim three nor 0001 6/01/1 n is: Check	im it is. Do not list of apriority unsecured	aims already inc	luded in Part Continuation	1. If more Page of
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Nonpriority Creditor's Name PO Box 1566 Manitowoc, WI 54221 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other so alphabetical order of the creditor what in the count is alphabetical order of the creditor what is a creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 3.If you have more that is creditors in Part 4.If you have more that 4.If yo	no holds eat type of claim three nor 0001 6/01/1 n is: Check ed claim: paration agring plans, a	im it is. Do not list of apriority unsecured of apriority unsecured of a secured of	aims already inc claims fill out the	luded in Part Continuation	1. If more Page of

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	1 Raymond Paul Link 2 Rhonda Sue Link		Case number (if know)	16-23475	
4.2	Americollect Inc	Last 4 digits of account number	5301		\$478.00
	Nonpriority Creditor's Name PO Box 1566 Manitowoc, WI 54221	When was the debt incurred?	12/01/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Emergency	Medical Associates	i	
4.3	Brookfield Anesthesiologists SC	Last 4 digits of account number	5193		\$669.24
	Nonpriority Creditor's Name PO Box 68-6341 Milwaukee, WI 53268	When was the debt incurred?	10/1996		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Judgment			
4.4	Capital Management Services, LP	Last 4 digits of account number	0553		\$273.00
	Nonpriority Creditor's Name 698 1/2 S. Ogden St. Buffalo, NY 14206	When was the debt incurred?	1/2015		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts	
	☐Yes	■ Other. Specify Consumer	debt		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 2	Raymond Paul Link Rhonda Sue Link		Case number (if know)	16-23475	
	Capital One Bank	Last 4 digits of account number	2512		\$869.00
	Nonpriority Creditor's Name 15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	4/01/15		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce th	at you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debt	S	
	Yes	Other. Specify Credit Card	I		
	Check Into Cash	Last 4 digits of account number			\$200.00
	Nonpriority Creditor's Name 6816 W. Brown Deer Road Milwaukee, WI 53233	When was the debt incurred?	1/2015		
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	· ·	•	
	No	Debts to pension or profit-sharing		S	
	Yes	Other. Specify Consumer	debt		
4.7	Citibank	Last 4 digits of account number	1805		\$17,290.16
	Nonpriority Creditor's Name P.O. Box 769004 San Antonio, TX 78245-9004	When was the debt incurred?	4/2014		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce th	at you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debt	s	
	Yes	■ Other. Specify Consumer	debt		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Debtor 2	Raymond Paul Link Rhonda Sue Link		Case number (if know) 16-23475	
	Comcast Cablevision	Last 4 digits of account number		\$338.66
;	Nonpriority Creditor's Name 5205 Fruitville Road Sarasota. FL 34232	When was the debt incurred?	1/2015	_
Ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Consumer	debt	_
	Enhanced Recovery Company Nonpriority Creditor's Name	Last 4 digits of account number	2526	\$371.00
;	8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	10/01/15	_
ī	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Time Warn	er Cable	_
4.1	EOS/CCA	Last 4 digits of account number	7809	\$1,532.87
	Nonpriority Creditor's Name			. , ,
	Correspondence PO Box 981008	When was the debt incurred?	1/2015	_
	Boston, MA 02298-1008	- Acceptable later of Clarific Acceptable		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	Is: Check all that apply	
	Debtor 1 only			
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	Unliquidated		
	_	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	o ciaim:	
	■ Check if this claim is for a community debt		and the second of the second s	
	ls the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	debt	_

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto Debto	or 1 Raymond Paul Link Pr 2 Rhonda Sue Link	d Paul Link Sue Link Case number (if know) 16-23475		
4.1 1	Frank Cappozzo	Last 4 digits of account number	5264	\$568.88
	Nonpriority Creditor's Name PO Box 213	When was the debt incurred?	11/1198	
	Waukesha, WI 53187 Number Street City State Zlp Code	As of the data you file the claim	ics Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	<u>_</u>		
	Debtor 2 only	☐ Contingent		
	<u> </u>	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Judgment		
4.1	Guardian Credit Union	Last 4 digits of account number	0168	\$103.00
	Nonpriority Creditor's Name			•
	4219 W National Ave Milwaukee, WI 53215	When was the debt incurred?	1/01/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Consumer	debt	
4.1	H&R Block			¢245.00
3	Nonpriority Creditor's Name	Last 4 digits of account number		\$245.00
	P.O. Box 677463 Dallas, TX 75267	When was the debt incurred?	1/2015	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only			
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	<u> </u>	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	u viaiiii.	

debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Consumer debt

☐ Student loans

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Check if this claim is for a community

Is the claim subject to offset?

Debto Debto	Raymond Paul Link Rhonda Sue Link		Case number (if know)	16-23475	
4.1	Harris	Last 4 digits of account number	3890	\$1,323.00)
	Nonpriority Creditor's Name 111 West Jackson B Chicago, IL 60604	When was the debt incurred?	1/2015		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	Contingent			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that	at you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debte	S	
	Yes	Other. Specify WE Energie	es		
4.1 5	Kohls	Last 4 digits of account number	2192	\$331.00	<u> </u>
	Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	When was the debt incurred?	12/01/14		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that	at you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debt	S	
	☐ Yes	Other. Specify Consumer	debt		
4.1	Liberty Mutual Group	Last 4 digits of account number	4010	\$124.00)
	Nonpriority Creditor's Name 1000 Omega Drive Creditor BA 15305	When was the debt incurred?	1/2015		
	Crafton, PA 15205 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	Student loans			

debt

■ No □ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Consumer debt

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

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 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Is the claim subject to offset?

Debto Debto	or 1 Raymond Paul Link or 2 Rhonda Sue Link		Case number (if know) 16-2347	5
4.1 7	North High School	Last 4 digits of account number	2877	\$949.00
	Nonpriority Creditor's Name 2222 Michigan Ave Waukesha, WI 53188	When was the debt incurred?	1/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only			
	Debtor 2 only	Contingent		
	_	Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did r	not
	No	Debts to pension or profit-sharir	og plans, and other similar debts	
	☐ Yes	Other. Specify Consumer		
				
4.1 8	Nuvell Credit	Last 4 digits of account number	9777	\$6,506.00
	Nonpriority Creditor's Name 5700 Crooks Rd Ste 301 Troy, MI 48098	When was the debt incurred?	8/01/04	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did r	not
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Automobile	9	
4.1				
9	OAC	Last 4 digits of account number	2303	\$54.00
	Nonpriority Creditor's Name PO Box 500	When was the debt incurred?	1/2015	
	Baraboo, WI 53913	Trien was the dept incurred?	1/2013	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		

□ Debtor 1 and Debtor 2 only
□ At least one of the debtors and another
□ Check if this claim is for a community debt
□ No
□ Yes
□ Other. Specify
□ Disputed

Type of NONPRIORITY unsecured claim:
□ Student loans
□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
□ Debts to pension or profit-sharing plans, and other similar debts
□ Other. Specify
□ Radiology Waukesha

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Schedule E/F: Creditors Who Have Unsecured Claims

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OAC	Last 4 digits of account number	Multiple	\$1
Nonpriority Creditor's Name PO Box 371100 Milwaukee, WI 53237	When was the debt incurred?	4/2013	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical		
Professional Receivable			
Management	Last 4 digits of account number	Multiple	
Nonpriority Creditor's Name P.O. Box 1108 Waukesha, WI 53187-1108	When was the debt incurred?	4/2013	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	Student loans		
debt	Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Medical		
Professional Recovery Consultants	Last 4 digits of account number	1147	\$
Nonpriority Creditor's Name			_
PO Box 51187	When was the debt incurred?	8/2014	
Durham, NC 27717 Number Street City State Zlp Code	As of the date you file the slaim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	ээ. Опеск ан тат арргу	
Debtor 1 only	_		
_ ′	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		

■ No ☐ Yes

debt

☐ Disputed Type of NONPRIORITY unsecured claim:

 \square Student loans

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Georgia Department of Revenue

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Schedule E/F: Creditors Who Have Unsecured Claims

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lacksquare At least one of the debtors and another

■ Check if this claim is for a community

Is the claim subject to offset?

	r 1 Raymond Paul Link r 2 Rhonda Sue Link		Case number (if know)	16-23475	
4.2	Prohealth Care, Inc	Last 4 digits of account number	Multiple		\$36
	Nonpriority Creditor's Name P.O. Box 3166	When was the debt incurred?	1/2016		

2	Prohealth Care, Inc	Last 4 digits of account number Multiple	\$368.00
	Nonpriority Creditor's Name P.O. Box 3166	When was the debt incurred? 1/2016	
	Milwaukee, WI 53201-3166 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
2	Roundy's Supermarket Inc	Last 4 digits of account number 3075	\$238.82
	Nonpriority Creditor's Name Attn: NSF Department	When was the debt incurred? 7/1996	
	MS-1150	When was the dest incurred: 1/1990	
	Box 473 Milwaukee, WI 53201		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you	did not
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Judgment	
2	Security Finance	Last 4 digits of account number Multiple	\$3,717.00
	Nonpriority Creditor's Name	Last 4 digits of account number MUITIPIE	45,717.00
	121 West Sunset Drive	When was the debt incurred? 8/07/15	
	Waukesha, WI 53189		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	<u> </u>	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	P. L
	Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you report as priority claims 	aia not
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Consumer debt	
	- 1€3	Other. Specify	

Schedule E/F: Creditors Who Have Unsecured Claims

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Rhonda Sue Link		Case number (if know) 16-23475	
Sixteenth Street Community Health	Last 4 digits of account number	2441	,
Nonpriority Creditor's Name 1032 S. Cesar Chaves Drive	When was the debt incurred?	2/2016	
Milwaukee, WI 53204-2203 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,		
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
_	☐ Student loans	a Gain.	
■ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	aradori agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical		
Southern Collection	Last 4 digits of account number	6679	\$1,3
Nonpriority Creditor's Name PO Box 25006	When was the debt incurred?	1/2015	
Little Rock, AR 72221		1/2010	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Bank Of Th	ne Ozarks	
State Collection Service	Last 4 digits of account number	Multiple	\$3,7
Nonpriority Creditor's Name	- Last + digits of account nulliber		+-,-
2509 S Stoughton Rd Madison, WI 53716	When was the debt incurred?	9/01/11	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		

debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Type of NONPRIORITY unsecured claim:

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

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□ Debts to pension or profit-sharing plans, and other similar debts
■ Other. Specify Waukesha Memorial Hospital Inc

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☐ At least one of the debtors and another

Is the claim subject to offset?

 \square Check if this claim is for a community

☐ Student loans

Rhonda Sue Link		Case number (if know) 16-23475	
State Collection Service	Last 4 digits of account number	5497	\$1,200.
Nonpriority Creditor's Name 2509 S Stoughton Rd	When was the debt incurred?	3/01/15	
Madison, WI 53716 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	,	191 Shook all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify State Of W	isconsin-Office Public	
State Collection Service		Multiple	\$918
Nonpriority Creditor's Name	Last 4 digits of account number	<u>muniple</u>	4310
2509 S Stoughton Rd Madison, WI 53716	When was the debt incurred?	2/01/14	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
\square Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
☐ Yes	Other. Specify Prohealtho	are Medical Associates	
State of Wisconsin		1211	\$1,628.
Nonpriority Creditor's Name	Last 4 digits of account number		φ1,020.
Office of Public Defender	When was the debt incurred?	8/2000	
17 S. Fairchild Road			
Madison, WI 53703	As of the date year file, the stairs	in Check all that apply	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	і s: Опеск ан тлат арріу	
Debtor 1 only	<u>_</u>		
Debtor 2 only	☐ Contingent		
	☐ Unliquidated		

debt

■ No

☐ Yes

■ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

lacksquare At least one of the debtors and another

■ Check if this claim is for a community

Schedule E/F: Creditors Who Have Unsecured Claims

Type of NONPRIORITY unsecured claim:

■ Other. Specify Consumer debt

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

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 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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☐ Disputed

☐ Student loans

report as priority claims

\$572.00 All that apply The ement or divorce that you did not and other similar debts \$141.50
ement or divorce that you did not
rement or divorce that you did not and other similar debts
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\$141.50
\$141.50
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ement or divorce that you did not
nd other similar debts
\$60.00
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Ill that apply
ement or divorce that you did not
-

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

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■ Other. Specify **Dollar General**

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

	or 2 Rhonda Sue Link		Case number (if know) 16-23475	
4.3 5	Unifund CCR Partners	Last 4 digits of account number	1134	\$12,595.39
	Nonpriority Creditor's Name 10625 Techwoods Circle Cincinnati, OH 45242	When was the debt incurred?	6/2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Judgment		
4.3 6	Unifund CCR Partners	Last 4 digits of account number	1134	\$12,595.39
	Nonpriority Creditor's Name 10625 Techwoods Circle Cincinnati, OH 45242	When was the debt incurred?	6/2015	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	■ Other. Specify Judgment		
4.3	Waukesha County Department of			
7	Administra	Last 4 digits of account number	Multiple	\$9,240.00
	Nonpriority Creditor's Name 515 West Moreland Blvd Room 348 Waukesha, WI 53188	When was the debt incurred?	6/2015	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	□ Diameted		

debt

■ No □ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Type of NONPRIORITY unsecured claim:

■ Other. Specify Consumer debt

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

 \square Student loans

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 $\hfill \square$ At least one of the debtors and another

Is the claim subject to offset?

■ Check if this claim is for a community

Debto	or 1 Raymond Paul Link		Case number (if know) 16-23475					
4.3	Westgrove Woods LLC	Last 4 digits of account number		\$2,329.00				
	Nonpriority Creditor's Name 2105 Kensington Dr Waukesha, WI 53188	When was the debt incurred?	1/2016					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	_						
	Debtor 2 only	Contingent						
	_	Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	■ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Other. Specify Eviction						
4.3	Westgrove Woods LLC	Last 4 digits of account number	0149	\$1.00				
	Nonpriority Creditor's Name 2105 Kensington Dr Waukesha, WI 53188	When was the debt incurred?	3/2016					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	□ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	■ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	□Yes	■ Other. Specify Small Clair						
4.4	Wisconsin Electric Power	Last 4 digits of account number	4645	\$2,186.00				
0	Nonpriority Creditor's Name			. ,				
	333 W Everett Milwaukee, WI 53201	When was the debt incurred?	12/01/14					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	Пол						
	<u> </u>	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						

Part 3: List Others to Be Notified About a Debt That You Already Listed

 \square Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

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debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

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Is the claim subject to offset?

report as priority claims

■ Other. Specify Utility

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Raymond Paul Link Debtor 2 Rhonda Sue Link		Case number (if know)	16-23475
Name and Address AT & T PO Box 5080 Carol Stream, IL 60197	On which entry in Part 1 or Part 2 did y Line 4.10 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priori Part 2: Creditors with Nonp	·=
·	Last 4 digits of account number		
Name and Address Credit Collection Services Two Wells Avenue Newton Center, MA 02459	On which entry in Part 1 or Part 2 did y Line 4.16 of (Check one):	vou list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp	
Nowton School, max 92-93	Last 4 digits of account number		
Name and Address Credit Management Control Attn: Bankruptcy Dept Po Box 118288 Carrollton, TX 75011	On which entry in Part 1 or Part 2 did y Line 4.9 of (<i>Check one</i>):	rou list the original creditor? Part 1: Creditors with Priori Part 2: Creditors with Nonp	
·	Last 4 digits of account number		
Name and Address Emergency Medical Associates P.O. Box 44308	On which entry in Part 1 or Part 2 did y Line 4.1 of (<i>Check one</i>):	vou list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp	·=
Madison, WI 53744-4308	Last 4 digits of account number	Part 2: Creditors with Nonp	nonty onsecured Claims
Name and Address Emergency Medical Associates P.O. Box 44308	On which entry in Part 1 or Part 2 did y Line 4.2 of (Check one):	☐ Part 1: Creditors with Priori	•
Madison, WI 53744-4308	Last 4 digits of account number	■ Part 2: Creditors with Nonp	riority Unsecured Claims
Name and Address Global Credit & Collection Corp. P.O. Box 101928, Dept 2417	On which entry in Part 1 or Part 2 did y Line 4.7 of (<i>Check one</i>):	vou list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp	
Birmingham, AL 35210	Last 4 digits of account number	Part 2: Creditors with Nonp	riority Unsecured Claims
Name and Address Kohn Law Firm	On which entry in Part 1 or Part 2 did y Line 4.35 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priori	ty Unsecured Claims
Attorney Vincent R. Bauer 735 N. Water Street Suite 1300		■ Part 2: Creditors with Nonp	riority Unsecured Claims
Milwaukee, WI 53202	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?	
Kohn Law Firm Attorney Vincent R. Bauer 735 N. Water Street Suite 1300 Milwaukee, WI 53202	Line 4.36 of (Check one):	Part 1: Creditors with Priori Part 2: Creditors with Nonp	•
Milwaukee, WI 33232	Last 4 digits of account number		
Name and Address Lake Country Pathologists PO Box 70	On which entry in Part 1 or Part 2 did y Line 4.20 of (Check one):	rou list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp	•
Lake Forest, IL 60045	Last 4 digits of account number	- Part 2. Creditors with Nonp	nonty onsecured claims
Name and Address	On which entry in Part 1 or Part 2 did y	you list the original creditor?	
Prohealth Care Medical Associates N17 W24100 Riverwood Drive	Line 4.30 of (Check one):	Part 1: Creditors with Priori Part 2: Creditors with Nonp	
Waukesha, WI 53188	Last 4 digits of account number	·	
Name and Address	On which entry in Part 1 or Part 2 did y	•	hallon and Ole
Radiology Waukesha SC P.O. Box 1790	Line 4.19 of (<i>Check one</i>):	☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp	

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Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Raymond Paul Link Debtor 2 Rhonda Sue Link		Case number (if know) 16-23475
	Last 4 digits of account number	
Name and Address State of Wisconsin Office of Public Defender 17 S. Fairchild Road	On which entry in Part 1 or Part 2 d Line 4.29 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Madison, WI 53703	Last 4 digits of account number	
Name and Address Steller Recovery Inc PO Box 1119 Charlotte, NC 28201	On which entry in Part 1 or Part 2 d Line 4.8 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Time Warner Cable Retention Department 1320 North Martin Luther King Dr. Milwaukee, WI 53212	On which entry in Part 1 or Part 2 d Line 4.9 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Unifund PO Box 505 Linden, MI 48451	Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 4.7 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address US Bank P.O. Box 790167 Saint Louis, MO 63179-0167	On which entry in Part 1 or Part 2 d Line 4.4 of (<i>Check one</i>): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Waukesha Memorial Hospital 725 American Avenue Waukesha, WI 53188-5099	On which entry in Part 1 or Part 2 d Line 4.28 of (<i>Check one</i>): Last 4 digits of account number	iid you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address WE Energies Attn: Bankruptcy DeptA130 P.O. Box 2046	On which entry in Part 1 or Part 2 d Line 4.14 of (<i>Check one</i>):	ild you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

Milwaukee, WI 53201-2046

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 3,475.99
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 3,475.99
Total	6f.	Student loans	6f.	\$ Total Claim 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00

Last 4 digits of account number

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 17 of 18

Debtor 1 Raymond Paul Link
Debtor 2 Rhonda Sue Link

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

16-23475 Case number (if know)

87,731.59

6j. 87,731.59

Best Case Bankruptcy

Fill in this infor	mation to identify your	case:		
Debtor 1	Raymond Paul Li	nk		
	First Name	Middle Name	Last Name	
Debtor 2	Rhonda Sue Link	(
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF WISCONSIN	
Case number	16-23475			
(if known)				☐ Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Time Warner Cable 1320 North Martin Luther King Drive Milwaukee, WI 53212	Debtors have cable service with creditor.
2.2	Westgrove Woods LLC 2102 MacArthur Rd #22 Waukesha, WI 53188	Debtors have a residential real state lease with landlord.

Fill in this info	ormation to identify your	case:			
Debtor 1	Raymond Paul Li				
Debtor 2	First Name Rhonda Sue Link	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	EASTERN DISTRICT OF	WISCONSIN		
Case number	16-23475				
(if known)	10-23473				Check if this is an amended filing
Official F	orm 106H				
	e H: Your Cod	ehtors			12/15
Joneau	C III. I Oui Oou	CDIOIS			12/13
people are filir ill it out, and r	ng together, both are equ number the entries in the	ally responsible for supply	ing correct informat	tion. If more space is ne	te as possible. If two married eded, copy the Additional Page, of any Additional Pages, write
1. Do you	have any codebtors? (If	you are filing a joint case, do	not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
		lived in a community prop Nevada, New Mexico, Puert			states and territories include
□ No. Go	to line 2			,	
_		use, or legal equivalent live w	vith you at the time?		
		,g	,		
□ N					
— 1	es.				
	In which community state	e or territory did you live?	-NONE-	. Fill in the name and	d current address of that person.
	Name of your spouse, former sp				
	Number, Street, City, State & Zip	Code			
in line 2 a	gain as a codebtor only i D), Schedule E/F (Officia	f that person is a guaranto	r or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	umn 1: Your codebtor , Number, Street, City, State and Z	P Code		Column 2: The crec Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
Name)			Schedule E/F, lir	
				☐ Schedule G, line	
Numb	per Street			_	
City		State	ZIP Code		
3.2				□ Schodulo D line	
Name)			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
Numb	per Street			_	
City		State	ZIP Code		

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Schedule H: Your Codebtors

Fill	in this information to identify y	our case:							
Deb	otor 1 Raymo	nd Paul Link			.				
	otor 2 Rhonda	a Sue Link			-				
Uni	ted States Bankruptcy Court f	or the: EASTERN DISTRICT	OF WISCONSIN		_				
	se number 16-23475		-			Check if this is: An amende	J		
								wing postpetition chapter e following date:	
<u>O</u>	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your	Income						12/1	
sup spo atta	plying correct information. I use. If you are separated an	s possible. If two married peo f you are married and not filii d your spouse is not filing wi orm. On the top of any additi ment	ng jointly, and your s ith you, do not inclu	spouse is de inform	livin atior	g with you, inclu about your spo	ıde inf use. If	ormation about your more space is needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	or noi	n-filing spouse	
	If you have more than one just		☐ Employed			■ Emplo	yed		
	attach a separate page with information about additional	• •	■ Not employed			☐ Not er	employed		
	employers.	Occupation				LPN			
	Include part-time, seasonal, self-employed work.	or Employer's name				Waukes	ha Sp	orings Nursing	
	Occupation may include stu or homemaker, if it applies.	dent Employer's address				1810 Ke Waukes		gton Drive /I 53188	
		How long employed t	here?			4	years	3	
Par	t 2: Give Details Abou	t Monthly Income							
	mate monthly income as of use unless you are separated.	the date you file this form. If	you have nothing to re	eport for ar	ny lin	e, write \$0 in the	space.	Include your non-filing	
	u or your non-filing spouse ha e space, attach a separate sh	eve more than one employer, co	ombine the information	n for all em	ploy	ers for that perso	n on th	e lines below. If you need	
					F	For Debtor 1		Debtor 2 or -filing spouse	
2.		, salary, and commissions (bothly, calculate what the monthle		2.	\$_	0.00	\$	3,155.38	
3.	Estimate and list monthly	overtime pay.		3	+\$_	0.00	+\$	0.00	

Official Form 106I Case 16-23475-svk Doc 10 Filed 05/12/16 page 1 Page 32 of 57

Calculate gross Income. Add line 2 + line 3.

0.00

3,155.38

16-23475 Case number (if known)

				F	For Debtor 1		For Debtor	2 or	
							non-filing s		
	Cop	y line 4 here	4.	\$	5	0.00	\$3	,155.38	<u>3</u>
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	. 9	:	0.00	\$	349.22	•
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.		<u> </u>	0.00	\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d.			0.00	\$	0.00	
	5e.	Insurance	5e.			0.00	\$	149.91	
	5f.	Domestic support obligations	5f.		·	0.00	\$	0.00	_
	5g.	Union dues	5g.			0.00	Ψ	0.00	<u> </u>
	5g. 5h.	Other deductions. Specify: Tax Levy	5h.			0.00	· \$	81.25	
6			-	,					_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	-	0.00	\$	580.38	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		0.00	\$2	,575.00	<u>)</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. \$	6 (0.00	\$	0.00)
	8b.	Interest and dividends	8b.	. \$		0.00	\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. \$	S (0.00	\$	541.00	
	8d.	Unemployment compensation	8d.	. \$	6	0.00	\$	0.00	<u> </u>
	8e.	Social Security	8e.	. \$	6	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	9	6 (0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	. \$	6	0.00	\$	0.00)
	8h.	Other monthly income. Specify:	8h.	.+ \$	6(0.00	+ \$	0.00)
9.	٨٨٨	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$	541.0	<u> </u>
Э.	Auu	an other medine. Add lines databaset-out-out-out-out-out-out-out-out-out-ou	Э.	Ψ_		J.00	Ψ	341.0	
10	Calc	ulate monthly income. Add line 7 + line 9.	o. s	\$	0.00	+ \$	3,116.00	= \$	3,116.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	0. 4	Ψ	0.00	- Ψ_	3,110.00	- Ψ –	3,110.00
11.	State Inclu	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your or friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	deper		, ,		ed in <i>Schedul</i> e	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain les						\$	3,116.00
10	Da ::	you owned an ingresses or degrees within the year often you file this forms						Comb	ined Ily income
13.	ро у ■	ou expect an increase or decrease within the year after you file this form? No.							
		Yes. Explain: Debtors do not anticipate any change in income of Debtors do not participate in an educational IRA.	or ex	xper	nses in the	imme	diate future) .	

Official Form 106I

Fill i	n this info	ormation to identify yo	our case:						
Debt	ebtor 1 Raymond Paul Link			Check if this is:					
	Debtor 2 Rhonda Sue Link Spouse, if filling)					☐ An amended filing ☐ A supplement showing postpetition chapter 13 expenses as of the following date:			
Unite	ed States E	Bankruptcy Court for the	: EASTE	RN DISTRICT OF WISCO	NSIN		M	M / DD / YYYY	
Case	e number	16-23475							
(If kn	iown)								
		Form 106J							
		ıle J: Your l							12/1
info	rmation.		eded, atta	If two married people ar ch another sheet to this n.					
Part		escribe Your House	hold						
1.		i joint case? So to line 2.							
	_	Does Debtor 2 live i	in a separa	ate household?					
		■ No □ Yes. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of De	ebtor	2.	
2.	Do vou	have dependents?	□ No		•				
	-	ist Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not s				D			•	□ No
	depende	ents names.			Daughter		_	9	■ Yes □ No
					Son			13	■ Yes □ No
					Son			16	■ Yes
									□ No □ Yes
3.	expense	r expenses include es of people other tl f and your depende	han $_{\square}$	No Yes					Li Tes
Part	<u> </u>	stimate Your Ongoi		v Expenses					
Esti expe	mate you	ur expenses as of your of a date after the b	our bankru	uptcy filing date unless y y is filed. If this is a supp					
the	value of	such assistance and		government assistance i luded it on S <i>chedule I:</i> \				V	
(Offi	icial Forr	m 106l.)					_	Your expe	enses
4.		tal or home owners ts and any rent for the		ses for your residence. In	nclude first mortgage	e 4.	\$		875.00
	If not in	cluded in line 4:							
	4a. R	eal estate taxes				4a.	\$		0.00
		roperty, homeowner's				4b.	-		0.00
		ome maintenance, re omeowner's associat	•			4c. 4d.	- : -		0.00 0.00
5.				ominium dues our residence, such as ho	me equity loans	4a. 5.			0.00

Schedule J: Your Expenses Official Form 106J page 1

		Raymond Paul Link Rhonda Sue Link			16-23475	
6.	Utilities:					
0.		y, heat, natural gas	6a.	\$	350.00	
		ewer, garbage collection	6b.	·	0.00	
	6c. Telephor	ne, cell phone, Internet, satellite, and cable services	6c.	\$	550.00	
	6d. Other. S	pecify:	6d.	\$	0.00	
7.		sekeeping supplies		\$	1,000.00	
8.	Childcare and	children's education costs	8.	\$	120.00	
9.	Clothing, laun	dry, and dry cleaning	9.	\$	150.00	
10.	Personal care	products and services	10.	\$	80.00	
11.	Medical and dental expenses 11. \$ 150.00					
12.		n. Include gas, maintenance, bus or train fare.	10	¢	290.00	
12	Do not include		12. 13.	·		
		t, clubs, recreation, newspapers, magazines, and books ntributions and religious donations	13. 14.	·	0.00	
	Insurance.	itributions and rengious donations	14.	Φ	0.00	
15.		insurance deducted from your pay or included in lines 4 or 20.				
	15a. Life insu		15a.	\$	0.00	
	15b. Health in	nsurance	15b.	\$	0.00	
	15c. Vehicle i	insurance	15c.	\$	75.00	
	15d. Other ins	surance. Specify:	15d.	\$	0.00	
16.	Taxes. Do not	include taxes deducted from your pay or included in lines 4 or 20.				
	Specify:		16.	\$	0.00	
17.		lease payments:	47-	•		
		ments for Vehicle 1	17a.		0.00	
		ments for Vehicle 2	17b.	· -	0.00	
	17c. Other. S 17d. Other. S		17c. 17d.	·	0.00	
12		s of alimony, maintenance, and support that you did not report as		Ψ	0.00	
10.		n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00	
19.		its you make to support others who do not live with you.		\$	0.00	
	Specify:		19.			
20.	•	perty expenses not included in lines 4 or 5 of this form or on Sch				
		es on other property	20a.	·	0.00	
	20b. Real esta		20b.	·	0.00	
		, homeowner's, or renter's insurance	20c.	· -	0.00	
		ance, repair, and upkeep expenses	20d.		0.00	
04		ner's association or condominium dues	20e.		0.00	
21.	Other: Specify	Pet expenses	21.	+\$	75.00	
22.	Calculate you	r monthly expenses				
	22a. Add lines	4 through 21.		\$	3,715.00	
	22b. Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$		
	22c. Add line 2	2a and 22b. The result is your monthly expenses.		\$	3,715.00	
22	Coloulata	wanthly not income				
23.		r monthly net income. e 12 (your combined monthly income) from Schedule I.	23a.	¢	2 116 00	
		ur monthly expenses from line 22c above.	23b.		3,116.00 3,715.00	
	20b. Copy you	ar monthly expenses from the 220 above.	200.	Ψ	3,7 13.00	
	23c. Subtract	your monthly expenses from your monthly income.				
		ılt is your monthly net income.	23c.	\$	-599.00	
24.	For example, do	t an increase or decrease in your expenses within the year after y you expect to finish paying for your car loan within the year or do you expect you e terms of your mortgage? Explain here: Mrs. Link is the only member of the family the	ır mortgage	payment to incre		
	□ 165.	have higher than average medical expenses.	101 15 CUV	cred by fied	ini manance. Therefore they	

Official Form 106J

Schedule J: Your Expenses

page 2

Fill in this information to identify your case:					
Debtor 1	Raymond Paul Li	nk			
	First Name	Middle Name	Last Name		
Debtor 2 Rhonda Sue Link					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT C	PF WISCONSIN		
Case number	16-23475				
(if known)				☐ Check if this is an amended filing	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have it that they are true and correct. X /s/ Raymond Paul Link Raymond Paul Link Signature of Debtor 1	read the summary and schedules filed with this declaration and X /s/ Rhonda Sue Link Rhonda Sue Link Signature of Debtor 2
Date May 12, 2016	Date May 12, 2016

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Debtor 1	mation to identify you Raymond Paul				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Rhonda Sue Lir	Niddle Name	Last Name		
United States Ba	ankruptcy Court for the	EASTERN DISTRICT OF	WISCONSIN		
Case number (if known)	16-23475				Check if this is an
(,					amended filing
Official Fo	rm 107				
Statement	of Financial	Affairs for Individ	duals Filing for E	Bankruptcy	4/16
information. If n number (if know	nore space is needed n). Answer every que	sible. If two married people a , attach a separate sheet to sstion. arital Status and Where You	this form. On the top of an		
	ır current marital stat				
_		u			
■ Married □ Not ma	-				
		Produced and all and			
2. During the I	iast 3 years, nave you	lived anywhere other than	where you live now?		
□ No					
■ Yes. Lis	st all of the places you	lived in the last 3 years. Do no	ot include where you live nov	V.	
Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
	acArthur Ct a, WI 53188	From-To:	■ Same as Debtor	1	Same as Debtor 1 From-To:
	singon Drive a, WI 53188	From-To:	Same as Debtor	1	Same as Debtor 1 From-To:
		ver live with a spouse or legalifornia, Idaho, Louisiana, Ne			
□ No					
Yes. M	ake sure you fill out So	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2 Expla	in the Sources of Yo	ır İncome			
Гатт Ехріа	in the Sources of To	di income			
Fill in the tot	al amount of income yo	mployment or from operating received from all jobs and a have income that you receive	all businesses, including part	-time activities.	endar years?
□ No					
Yes. Fi	ll in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
Official Form 107		Statement of Financial Aff	fairs for Individuals Filing for E	Bankruptcy	page 1

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Best Case Bankruptcy

Case number (if known) 16-23475

Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Operating a business \$10,539.75 Wages, commissions, bonuses, tips Operating a business \$11,792.93			Dobtor 1		Dobtor 2	
From January 1 of current year until the date you filed for bankruptcy: Departing a business Departing a busi				(before deductions and		oly. (before deductions
For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips Operating a business S39,124.00 Wages, commissions, bonuses, tips Operating a business Operating a business S15,468.00 Wages, commissions, bonuses, tips Operating a business Operating a			- wages, commissions,	\$10,539.75	•	\$11,792.93
Clanuary 1 to December 31, 2015 Donuses, tips Donuses, t			☐ Operating a business		Operating a bu	usiness
For the calendar year before that: (January 1 to December 31, 2014) Wages, commissions, bonuses, tips Operating a business			_	\$24,696.00		sissions, \$38,596.00
Clanuary 1 to December 31, 2014 Donuses, tips Donuses, t			☐ Operating a business		Operating a bu	usiness
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony, child support. Social Security, unemployment and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No			_	\$39,124.00	•	sissions, \$15,468.00
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support, Social Security, unemployment and other public benefit payments; pensions; rental income; interest, dividends; money collected from seutis; royalities; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No			☐ Operating a business		Operating a bu	usiness
Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 5. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support obligation a total of \$600 or more? No. Go to line 7. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support and alimony. Also, do not include payments for domestic support and alimony. Also, do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.		Fill in the details.		Ouese income from		
Sources of income Describe below. Comparison of the Comparison	□ No	Ü		,		
Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 5. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support obligations are total of \$600 or more? No. Go to line 7. Yes Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,000 or more? Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support and alimony. Also, do not include payments for domestic support and alimony. Also, do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to arattorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for				Grass income from		ma Grace income
## Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for				each source (before deductions and		(before deductions
Are either Debtor 1's or Debtor 2's debts primarily consumer debts. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to ar attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for			Unemployment	\$891.00		
 No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for 	6. Are either	Debtor 1's or Debtor 2 Neither Debtor 1 nor individual primarily for	2's debts primarily consume Debtor 2 has primarily cons a personal, family, or househo	er debts? sumer debts. Consumer debt old purpose."		,
 Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for 		,		aid you pay any creditor a tota	al of \$6,425" or more	<i>!</i>
Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for		paid that c not include	reditor. Do not include payme e payments to an attorney for	ents for domestic support obliques this bankruptcy case.	gations, such as child	d support and alimony. Also, do
■ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for	Yes.	Debtor 1 or Debtor 2	or both have primarily cons	umer debts.		agjustment.
Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to ar attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for		_		any ordenior a lole	a or wood or more!	
		☐ Yes List below include pa	each creditor to whom you payments for domestic support			
	Creditor'	s Name and Address	Dates of paym			Was this payment for

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Page 38 of 57

Debtor 1 Debtor 2	Raymond Paul Link Rhonda Sue Link		Cas	se number (if known)	16-23475
<i>Inside</i> of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yo g securities; and a	ou are a general partner; corporation ny managing agent, including one f
	No Yes. List all payments to an insider.				
Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
inside	n 1 year before you filed for bankruptoer? le payments on debts guaranteed or cos		yments or transfer a	any property on a	ccount of a debt that benefited a
	No Yes. List all payments to an insider				
Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Part 4:	Identify Legal Actions, Repossession	ns. and Foreclosures	•		
List al modifi	 n 1 year before you filed for bankrupte ll such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details. 				
	e title e number	Nature of the case	Court or agency		Status of the case
Unif	fund CCR LLC vs Rhonda Willix 5CV001134	Civil	Waukesha Cou Courthouse Clerk of Circui Room C108 515 W. Morelai Waukesha, WI	t Court	□ Pending□ On appeal■ Concluded
Link	stgrove Woods LLC vs Rhonda (6SC001549	Small Claims	Waukesha Cou Courthouse Clerk of Circui Room C108 515 W. Morelai Waukesha, WI	t Court	■ Pending □ On appeal □ Concluded
_	und CCR VS Rhonda Willix 5CV001134	Civil	Waukesha Cou Courthouse Clerk of Circui Room C108 515 W. Morelai Waukesha, WI	t Court	☐ Pending ☐ On appeal ■ Concluded
Check	n 1 year before you filed for bankrupton and fill in the details below No. Go to line 11. Yes. Fill in the information below.		<u> </u>		shed, attached, seized, or levied

Creditor Name and Address

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Describe the Property

Explain what happened

page 3

Value of the property

Date

	otor 1 otor 2	Raymond Paul Link Rhonda Sue Link		Cas	se number (if known)	16-23475			
acco		n 90 days before you filed for bankr unts or refuse to make a payment bo		did any creditor, including a bank or fir you owed a debt?	nancial institution	, set off any a	amounts from your		
		Yes. Fill in the details.							
	Cred	litor Name and Address	De	scribe the action the creditor took	Date taken	action was	Amoun		
12.		n 1 year before you filed for bankru -appointed receiver, a custodian, or		as any of your property in the possess er official?	ion of an assigne	e for the ben	efit of creditors, a		
	_	No Yes							
Pai		List Certain Gifts and Contribution	s						
13.	= 1	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	uptcy, c	lid you give any gifts with a total value	of more than \$60	0 per person	?		
	Gifts	s with a total value of more than \$60 person	0	Describe the gifts	Dates the g	you gave	Value		
		on to Whom You Gave the Gift and ress:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution.								
	more Char	s or contributions to charities that t e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates	s you ibuted	Value		
Pa	rt 6:	List Certain Losses							
15.		n 1 year before you filed for bankru mbling?	otcy or	since you filed for bankruptcy, did you	ı lose anything be	cause of the	ft, fire, other disaster		
	_	No Yes. Fill in the details.							
	Desc	cribe the property you lost and	Descri	be any insurance coverage for the loss	s Date	of your	Value of property		
		the loss occurred	Include	the amount that insurance has paid. List ace claims on line 33 of Schedule A/B: Pro	pending	. ,	los		
Pai	rt 7:	List Certain Payments or Transfers	i						
16.	cons	ulted about seeking bankruptcy or p	reparii	d you or anyone else acting on your being a bankruptcy petition? s, or credit counseling agencies for service			erty to anyone you		
	_	No Yes. Fill in the details.							
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not Y	ou	Description and value of any propert transferred	•	payment nsfer was	Amount of payment		
	Mille 735	er & Miller Law, LLC W Wisconsin Ave, Ste 600 vaukee, WI 53233-2413			1/4/2 1/14/ 1/28/ 2/25/ 3/10/ 4/11/ 4/13/	2016 2016 2016 2016 2016 2016	\$995.00		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known) 16-23475

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value transferred	of any property	Date payment or transfer was made	Amount of payment		
	Access Credit Counseling 633 W 5th St, Ste 26001 Los Angeles, CA 90071			1/14/2016	\$14.95		
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you list.	or to make payments to y		or transfer any prope	rty to anyone who		
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value transferred	of any property	Date payment or transfer was made	Amount of payment		
18.	18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than protection the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). include gifts and transfers that you have already listed on this statement.						
	■ No □ Yes. Fill in the details.						
	Person Who Received Transfer						
	Address	property transferred payments paid in experience paid in experience paid in experience page page page page page page page pag		s received or debts	Date transfer was made		
	Person's relationship to you						
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No.		operty to a self-settled t	rust or similar device o	of which you are a		
	■ No Yes. Fill in the details.						
	Name of trust	Description and value	e of the property transferred Date Transfe made				
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit Box	es, and Storage Units				
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred?	were any financial accour	nts or instruments held	in your name, or for yo	our benefit, closed,		
	Include checking, savings, money market, or o houses, pension funds, cooperatives, associat			shares in banks, credit	unions, brokerage		
	Yes. Fill in the details.						
			trument c	ate account was losed, sold, noved, or ansferred	Last balance before closing or transfer		
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for se cash, or other valuables?					tory for securities,		
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access Address (Number, Street, State and ZIP Code)		econtents	Do you still have it?		
		State and Air Code)					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

22.	Have you stored property in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy?	
	No			
	Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City,	Describe the contents	Do you still have it?
		State and ZIP Code)		
Par	9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someo for someone. —	ne else owns? Include any proper	ty you borrowed from, are storing for,	or hold in trust
	No			
	Yes. Fill in the details.	When in the manager.	December the superiors	Value
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Informa	ation		
For	he purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the airegulations controlling the cleanup of these substances.	ir, land, soil, surface water, ground	•	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate, o	r utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.	
24	Has any governmental unit notified you that you	ı may bo liable er netentially liable	under or in violation of an environme	ntal law?
24.	rias any governmental unit notineu you that you	i may be hable of potentially hable	under of in violation of an environme	iitai iaw :
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnership	ip (LLP)	
Offici		of Financial Affairs for Individuals Filing		page

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	btor 1 Raymond Paul Link btor 2 Rhonda Sue Link		Case number (if known)	16-23475						
	☐ A partner in a partnership									
	☐ An officer, director, or managing executive of a corporation									
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation								
	No. None of the above applies. Go to F	Part 12.								
	☐ Yes. Check all that apply above and fill	in the details below for each business.								
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identif Do not include S Dates business	ocial Security number or ITIN.						
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to	o anyone about your b	ousiness? Include all financial						
	■ No									

Date Issued

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

☐ Yes. Fill in the details below.

Address (Number, Street, City, State and ZIP Code)

Name

Debtor 1	Raymond Paul Link			
Debtor 2	Rhonda Sue Link		Case number (if known)	16-23475
Part 12:	Sign Below			
vith a bar	nd correct. I understand that making a nkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	, , ,	. ,,	property by fraud in connection
/s/ Rayn	nond Paul Link	/s/ Rhonda Sue Lini	K	
Raymor	nd Paul Link	Rhonda Sue Link		
Signatur	e of Debtor 1	Signature of Debtor 2		
D-4- N	ay 12, 2016	Date May 12, 2010	•	

Fill in this information to identify your case:							
Debtor 1	Raymond Paul Link						
Debtor 2 (Spouse, if filing)	Triona due Link						
United States B	Bankruptcy Court for the: Eastern District of Wisconsin						
Case number (if known)	16-23475						

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test* Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					Debt	or 1		or 2 or filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and c	ommissi	ons (before all	\$	1,209.54	\$	3,637.13
3.	Alimony and maintenance payments. Do not include Column B is filled in.	paym	ents from	a spouse if	\$	0.00	\$	0.00
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Include regular contributions from a si filled in. Do not include payments you listed on line 3.	t. Includ d, your	de regula depende	r contributions ents, parents,	\$	0.00	\$	0.00
5.	Net income from operating a business, profession,	or far	m					
			Del	otor 1				
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or far	rm \$	0.00	Copy here ->	\$	0.00	\$	0.00
6.	Net income from rental and other real property	_		-				
			Del	otor 1				
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	- \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00
7.	Interest, dividends, and royalties	_			\$	0.00	\$	0.00
١.,	,,,				_		_	

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list i here: For you For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$ 0.00 \$ 0.00 Total amounts from separate pages, if any. 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A. to the total for Column B. \$ 1,209.54 + \$ 3,637.13 \$ 4,846.67 Total current monthly income from line 11 Copy line 11 heres> 12a. Copy your total current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income for the year. Follow these steps: 12b. The result is your annual income for this part of the form 12c. The result is your annual income for this part of the form 12b. The result is your annual income for this part of the form 12c. The result is your annual income for your state and size of household. Fill in the median family income for your state and size of household. 5 Will Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.	ebtor ebtor		da Sue Link			Case numb	er (<i>if known</i>)	16-2347	5	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you S 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. S 0.00 \$ 0.00								Debtor 2	or	
the Social Security Act. Instead, list it here: For you	8. 1	Jnemploy	ment compensation			\$	0.00	\$	0.00	
Persion or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefit received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income for the state in which you live. 13. Calculate the median family income that applies to you. Follow these steps: 13. Calculate the median family income that applies to you. Follow these steps: 13. Calculate the median family income for this part of the form 14. Multiply by 12 (the number of people in your household. 15. Fill in the median family income for your state and size of household. 16. Fill in the median family income for your state and size of household. 17. Fill in the median family income for your state and size of household. 18. In the state in which you live. 19. In the median family income for your state and size of household. 19. In the state in which you live. 10. In the median family income for your state and size of household. 10. In the median family income for your state and size of household. 10. In the state in which you live. 11. In the median family income for people in your household. 12. In the state in which you live. 13. Say 14.361.00 14. How do the lines compare? 14. Line 12b is less than or equal to line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. So to Part 3. 14. Line 12b is more than line 13. On the top of page 1, check		he Social S	Security Act. Instead, list it here:		nefit under					•
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		14b. □	Line 12b is more than line 13. On the		x 2, The pr	esumption o	of abuse is	determined	by Form	122A-2.
	art :	Sigr	n Below							
		_		erjury that the information	on this sta	atement and	d in any at	tachments is	true and	correct.

X /s/ Raymond Paul Link

Raymond Paul Link

Signature of Debtor 1

Date May 12, 2016 MM / DD / YYYY

Official Form 122A-1

If you checked line 14a, do NOT fill out or file Form 122A-2.

X /s/ Rhonda Sue Link

Rhonda Sue Link

Signature of Debtor 2

Date May 12, 2016

MM / DD / YYYY

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Chapter 7 Statement of Your Current Monthly Income

Rhonda Sue Link

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2015 to 03/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Argus Technical

Income by Month:

6 Months Ago:	10/2015	\$1,986.25
5 Months Ago:	11/2015	\$2,220.00
4 Months Ago:	12/2015	\$1,560.00
3 Months Ago:	01/2016	\$0.00
2 Months Ago:	02/2016	\$0.00
Last Month:	03/2016	\$0.00
	Average per month:	\$961.04

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Unemployment

Income by Month:

6 Months Ago:	10/2015	\$0.00
5 Months Ago:	11/2015	\$0.00
4 Months Ago:	12/2015	\$0.00
3 Months Ago:	01/2016	\$0.00
2 Months Ago:	02/2016	\$0.00
Last Month:	03/2016	\$891.00
	Average per month:	\$148.50

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Waukesha Iron & Metal

Income by Month:

6 Months Ago:	10/2015	\$0.00
5 Months Ago:	11/2015	\$0.00
4 Months Ago:	12/2015	\$0.00
3 Months Ago:	01/2016	\$0.00
2 Months Ago:	02/2016	\$0.00
Last Month:	03/2016	\$600.00
	Average per month:	\$100.00

Debtor 1 Raymond Paul Link Phonda Sue Link

Case number (if known)

16-23475

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 10/01/2015 to 03/31/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Waukesha Springs

Income by Month:

6 Months Ago:	10/2015	\$3,181.93
5 Months Ago:	11/2015	\$2,930.63
4 Months Ago:	12/2015	\$5,329.30
3 Months Ago:	01/2016	\$3,666.33
2 Months Ago:	02/2016	\$3,777.81
Last Month:	03/2016	\$2,936.76
	Average per month:	\$3,637.13

Fill in this inform	nation to identify your	case:		
Debtor 1	Raymond Paul Lii	nk		
	First Name	Middle Name	Last Name	
Debtor 2	Rhonda Sue Link			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT C	PF WISCONSIN	
Case number	16-23475			
(if known)				Check if this is an amended filing

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

Debtor 1 Raymond Rhonda S	I Paul Link Sue Link	Case number (if known)	16-23475
name: Description of property securing debt:		 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□Yes
For any unexpired per in the information belo	ow. Do not list real estate leases. I	s ed in Schedule G: Executory Contracts and Unexpired Jnexpired leases are leases that are still in effect; the if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe your unexp	ired personal property leases		Will the lease be assumed?
Lessor's name:	Time Warner Cable		□ No
			■ Yes
Description of leased Property:	Debtors have cable service v	vith creditor.	
Lessor's name:	Westgrove Woods LLC		□ No
			■ Yes
Description of leased Property:	Debtors have a residential re	al state lease with landlord.	

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Debtor Debtor	Raymond Paul Link Rhonda Sue Link		Case number (if known)	16-23475	
Part 3:	Sign Below				
	penalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	ated my intention abou	t any property of my estate that sec	ures a debt and any personal	
X /s	s/ Raymond Paul Link	x	/s/ Rhonda Sue Link		
R	aymond Paul Link		Rhonda Sue Link		

Date

Signature of Debtor 2

May 12, 2016

Official Form 108

Signature of Debtor 1

May 12, 2016

Date

Statement of Intention for Individuals Filing Under Chapter 7

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Eastern District of Wisconsin

Debtor(s)	Chapter	· · · · ·
		7
DISCLOSURE OF COMPENSATION OF AT	TORNEY FOR I	DEBTOR(S)
 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bankru be rendered on behalf of the debtor(s) in contemplation of or in connection with the 	ptcy, or agreed to be pa	id to me, for services rendered or to
For legal services, I have agreed to accept	\$	1,600.00
Prior to the filing of this statement I have received		995.00
Balance Due	\$	605.00
2. \$ 335.00 of the filing fee has been paid.		
3. The source of the compensation paid to me was:		
■ Debtor □ Other (specify):		
4. The source of compensation to be paid to me is:		
■ Debtor □ Other (specify):		
5. I have not agreed to share the above-disclosed compensation with any other pe	erson unless they are me	embers and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persopy of the agreement, together with a list of the names of the people sharing it		
6. In return for the above-disclosed fee, I have agreed to render legal service for all a	spects of the bankruptcy	y case, including:
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor i b. Preparation and filing of any petition, schedules, statement of affairs and plan of the debtor at the meeting of creditors and confirmation hearing. d. [Other provisions as needed] 	which may be required;	
7. By agreement with the debtor(s), the above-disclosed fee does not include the follow Negotiations with secured creditors to reduce to market value reaffirmation agreements and applications as needed; prepara 522(f)(2)(A) for avoidance of liens on household goods; representations, judicial lien avoidances, relief from stay actions or an	e; exemption plannin ation and filing of mo sentation of the debt	otions pursuant to 11 USC ors in any dischargeability
CERTIFICATION		
I certify that the foregoing is a complete statement of any agreement or arrangement this bankruptcy proceeding.	nt for payment to me for	r representation of the debtor(s) in
May 12, 2016 /s/ Krysta L.	Kerr	
	torney	
735 W. WISCO Suite 600	onsin Avenue	
	NI 53233-2413	
414-277-7742 Name of law fit	2 Fax: 414-277-1303 rm	

United States Bankruptcy Court Eastern District of Wisconsin

In re	Raymond Paul Link Rhonda Sue Link		Case No.	16-23475
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR M	IATRIX	
The abo	ove-named Debtors hereby verify the	at the attached list of creditors is true and con	rect to the best	of their knowledge.
				-
Date:	May 12, 2016	/s/ Raymond Paul Link		
		Raymond Paul Link		
		Signature of Debtor		
Date:	May 12, 2016	/s/ Rhonda Sue Link		
		Phonda Suo Link	·	

Signature of Debtor